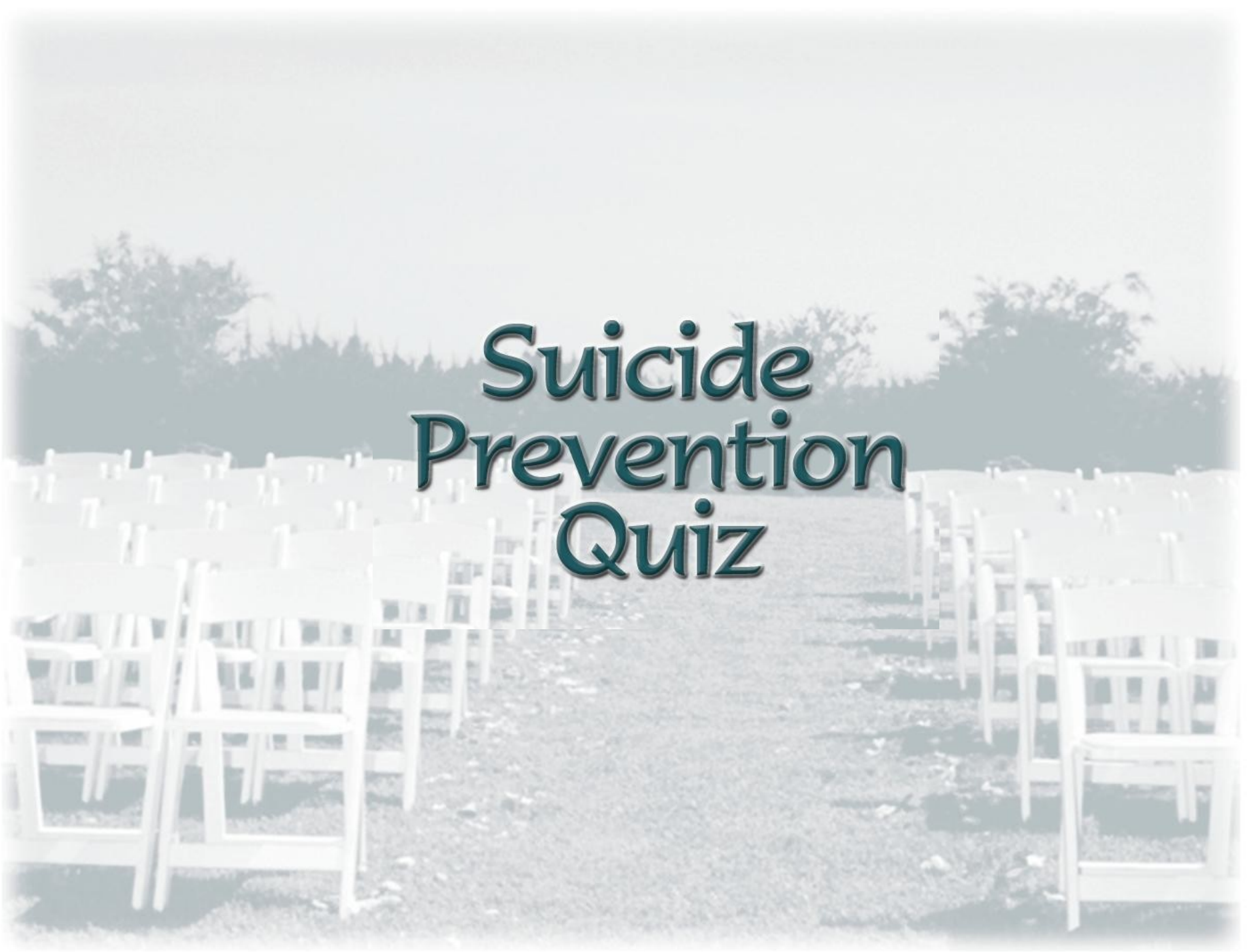
Suicide
Prevention:
Provide Aid - Secure Life

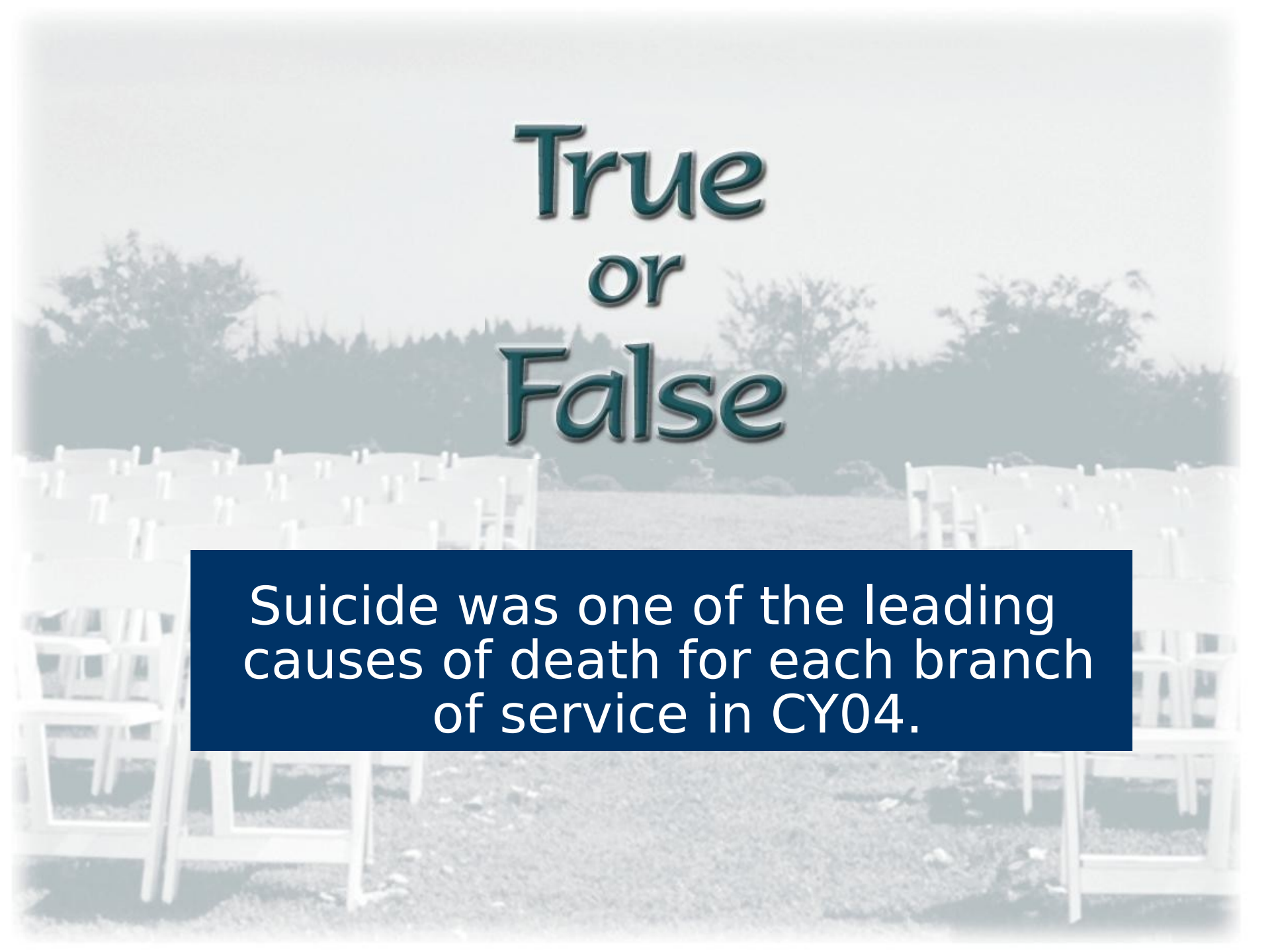
Goals

- State two suicide risk factors
- Recognize three warning signs of potential suicide
- Identify two resources that can be contacted for action or assistance

The Effects of Suicide…

- **Worldwide**, 1 million people take their lives each year
- **In the U.S.**, suicide is the 11th leading cause of all deaths
- **In the Navy/Marine Corps**, suicide has been the 2nd or 3rd leading cause of violent deaths for the last decade


Suicide
Prevention
Quiz



Suicide was one of the leading causes of death for each branch of service in CY04.

Suicide Rates per 100K During CY04

- Marine Corps 15.9
- Air Force 15.4
- Army 10.4
- Navy 10.3

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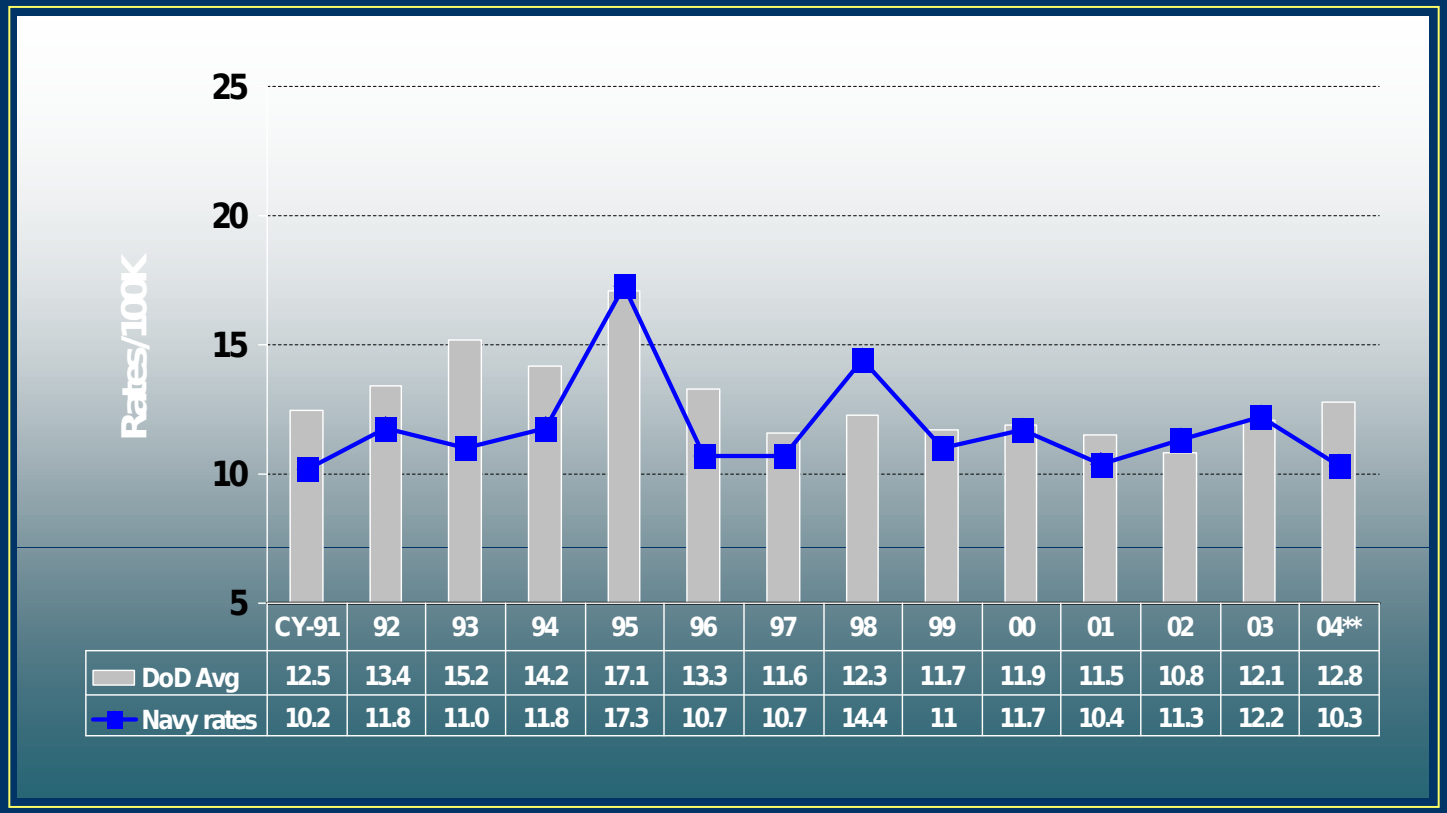
DoD & Navy Suicide Rates per 100,000
(CY-91 to CY-04)



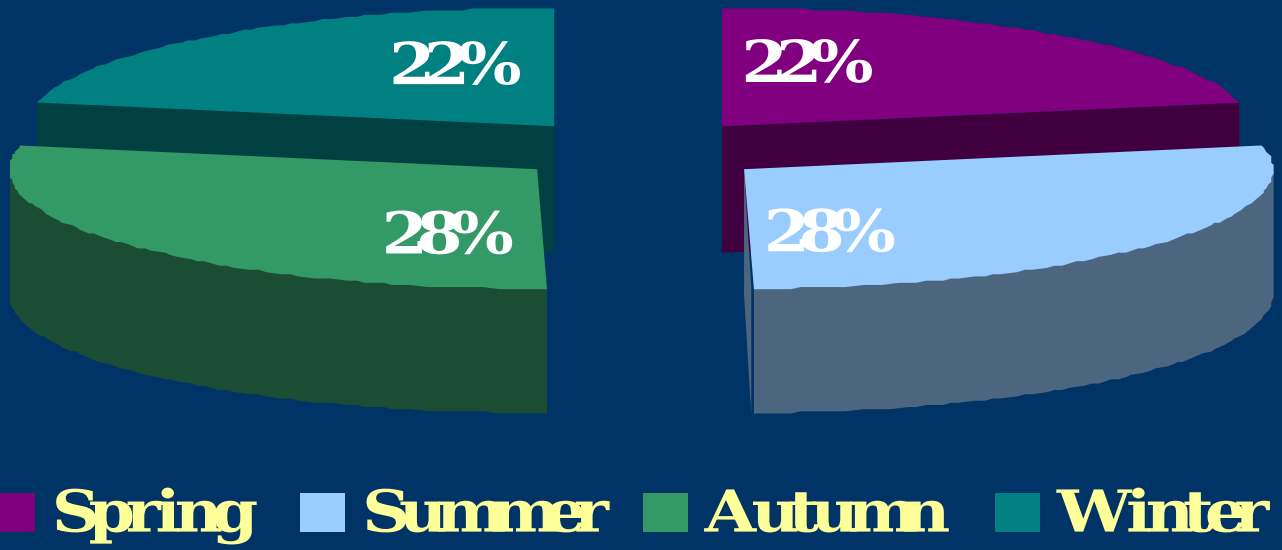
	CY-91	92	93	94	95	96	97	98	99	00	01	02	03	04**
DoD Avg	12.5	13.4	15.2	14.2	17.1	13.3	11.6	12.3	11.7	11.9	11.5	10.8	12.1	12.8
Navy rates	10.2	11.8	11.0	11.8	17.3	10.7	10.7	14.4	11	11.7	10.4	11.3	12.2	10.3

*::FY04 Are projections for the year

True or False

Suicide occurs most often during the holidays.

Suicides by Season



True or False

Officers complete suicide at the same rate as enlisted.

Suicide Completion Rate by Rank per 100K

- Enlisted personnel 11.5
- Naval Officer 5.9
- In the Marine Corps, all were Enlisted

True
or
False
Active duty females attempt suicide more often than active duty males.

Suicide Completion Rate by Gender

- Females are 3 times more likely to attempt suicide
- Female completion rate 2.8
- Males are 4 times more likely to complete suicide
- Male completion rate 12.0

True or False

The suicide risk is higher for a person who has made a previous suicide attempt.

Key Suicide Risk Factors

- Previous history of suicidal threats and/or attempts
- Direct or indirect talk or hints of suicidal intent/behavior
- Mental health problems

True or False

If the person does not directly tell you, then there is no way of determining if he/she is depressed.

Depressive Symptoms

- Episodes of crying or sadness
- Difficulty concentrating
- Less interest/ pleasure in usual activities
- Decreased energy
- Lessened productivity
- Decreased self-esteem
- Difficulty with sleep
- Negative outlook
- Increased irritability
- Increase/ decrease in appetite or weight
- Decreased sex drive
- Thoughts of death or suicide

The presence of risk factors does not mean a person will attempt suicide.

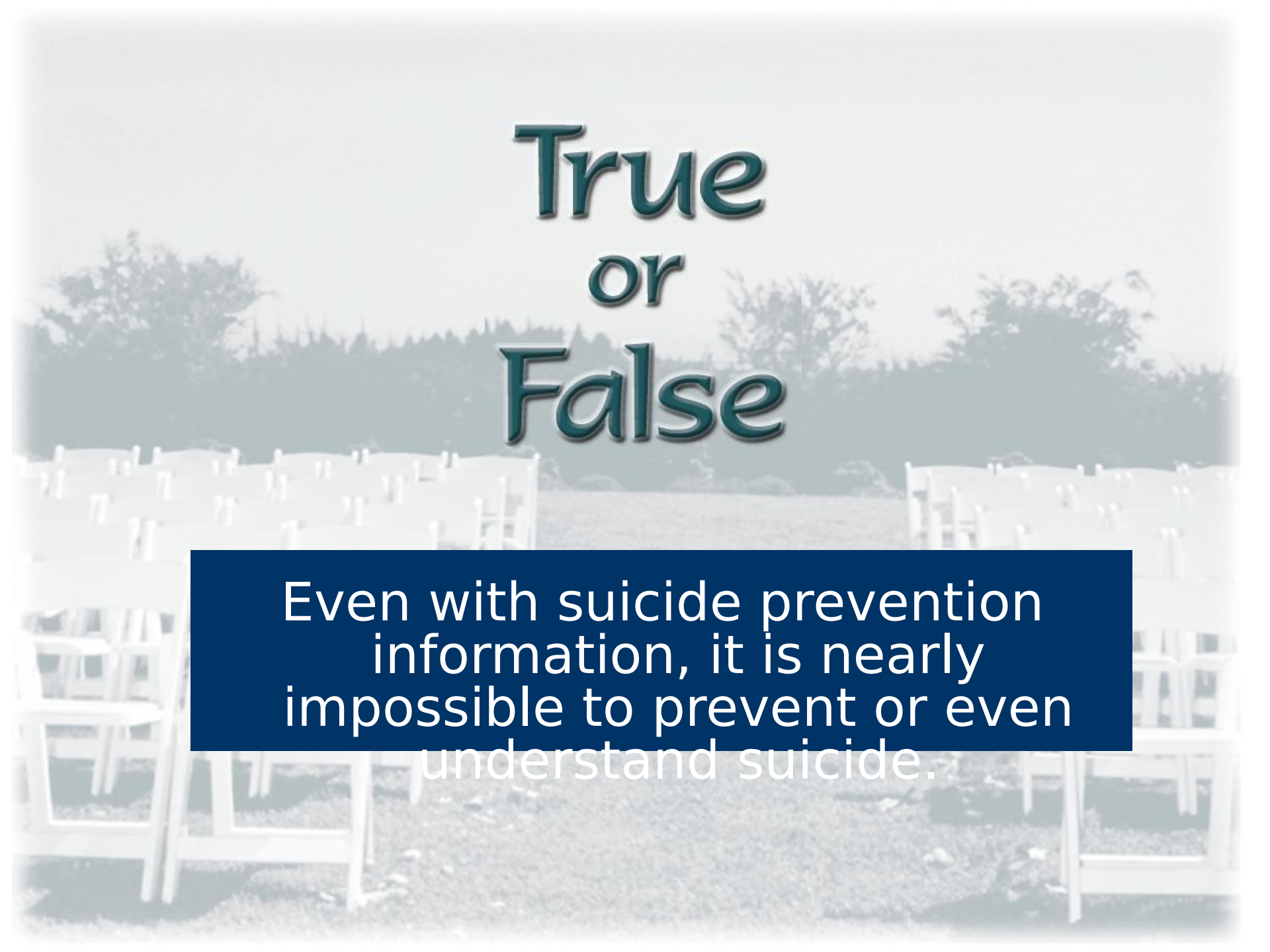
Protective Factors

- Unit cohesion/ camaraderie
- Healthy lifestyle
- Spiritual support
- Beliefs counter to suicide
- Optimistic outlook
- Positive attitude about getting help
- Effective problem-solving skills

True
or
False
Most of the time, individuals considering suicide do not give any warning of their plans.

Common Warning Signs

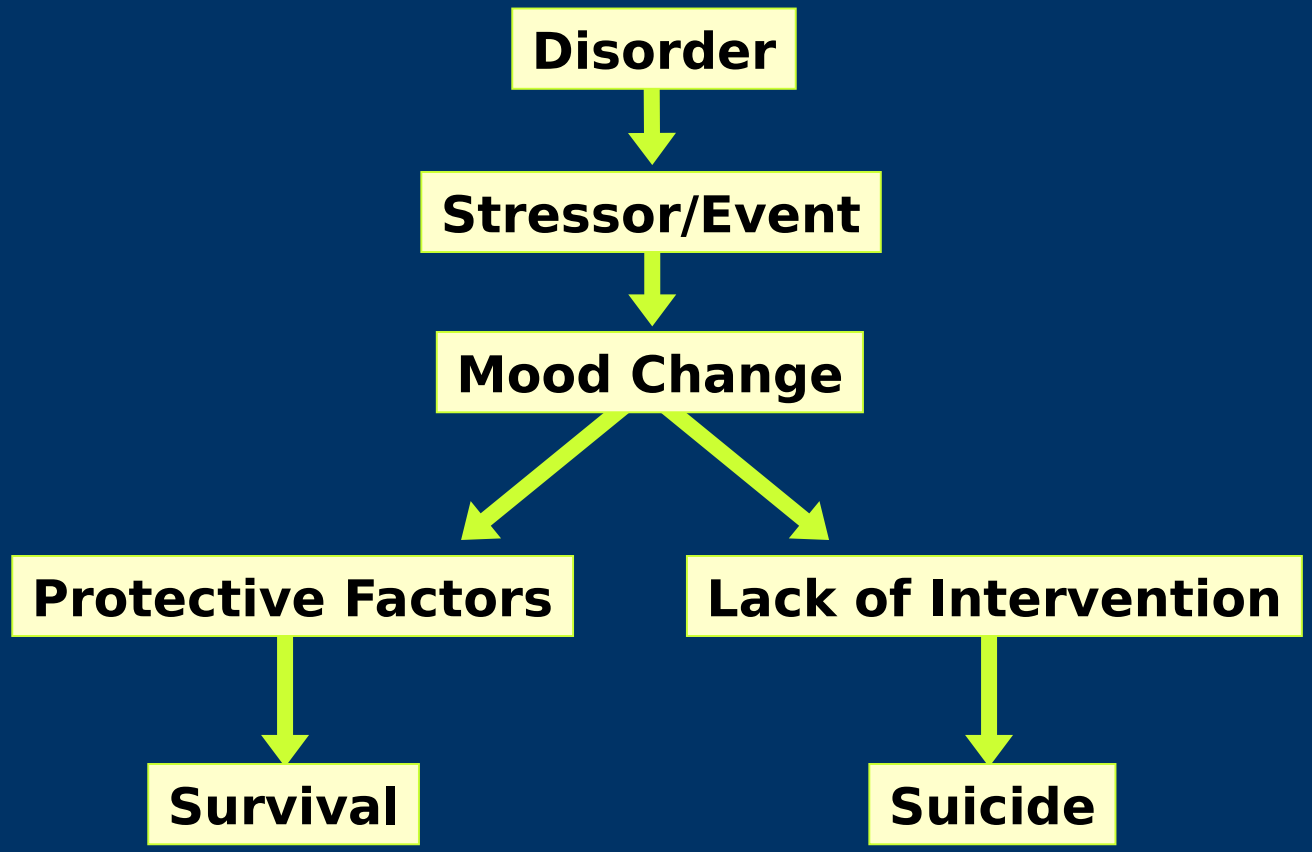
- Relationship difficulties
- Giving away possessions
- Impulsive and/or angry behavior
- Increased drinking/ drug use
- Legal, command or financial problems
- Performance difficulties
- Isolation/withdrawal from friends or family
- Resistance to help
- Performance difficulties
- Certain high-risk behaviors
- Preoccupation with death


True
or
False
Even with suicide prevention information, it is nearly impossible to prevent or even understand suicide.

Keys to Suicide Prevention

- Increased awareness
- Prevention education
- Knowledge of, and access to, resources
- Willingness to intervene on a Shipmate's or fellow Marine's behalf

Suicide Model



*Adapted from David Shaffer, M.D., Columbia U.

True or False

Talking with someone about their thoughts of dying may push them over the edge.

Provide AID

Ask the person immediately.

Intervene Immediately.

Don’t keep it a secret.

Secure LIFE

Locate help.

Inform Chain of Command.

Find someone —

Expedite help.

Don’t Leave the Person Alone!!!

Personal Action Plan Resources

- 911/Base Police
- Command Duty Officer
- Chaplain
- Medical Treatment Facility
- Fleet & Family Support Center (FFSC) 24-hour Information and Referral
  - 444-NAVY
  - 1-800-FSC-LINE
- 24-Hour Hotlines:
  - Crisis Center (622-1126)
  - Contact Peninsula (245-0041)

Seeking support when you need it is part of staying healthy.

444-NAVY
1-800-FSC-LINE

Medical

Play a unique role in suicide prevention.

- FACT:

  Medical visits tend to increase before a suicide completion

- FACT:

  Increased professional awareness =

  Decreased Suicide Rates

Medical

Risk increases in patients with:

- Injuries from previous suicide attempt
- Chronic/serious health problems
- History of mental health problems

- Note:
  Male suicidal risk is difficult to detect

Medical

Mental health difficulties were present in 38% of suicidal patients.

- Within these types of patients:
  - 25 % of suicides occurred within 1 to 4 weeks after discharge from an inpatient psychiatric unit
  - The risk for completion increases as mental health care appointments decrease in frequency

Medical

Mental/Physical Health Risk Factors:

- Mood, thought, self-esteem, personality disturbance (depression, anxiety, bipolar, schizoaffective disorder, emotionally unstable /manipulative)
- Substance abuse, psychiatric hospital discharge
- Acute or chronic illnesses threatening self integrity

Medical

Social / Family History Risk Factors:

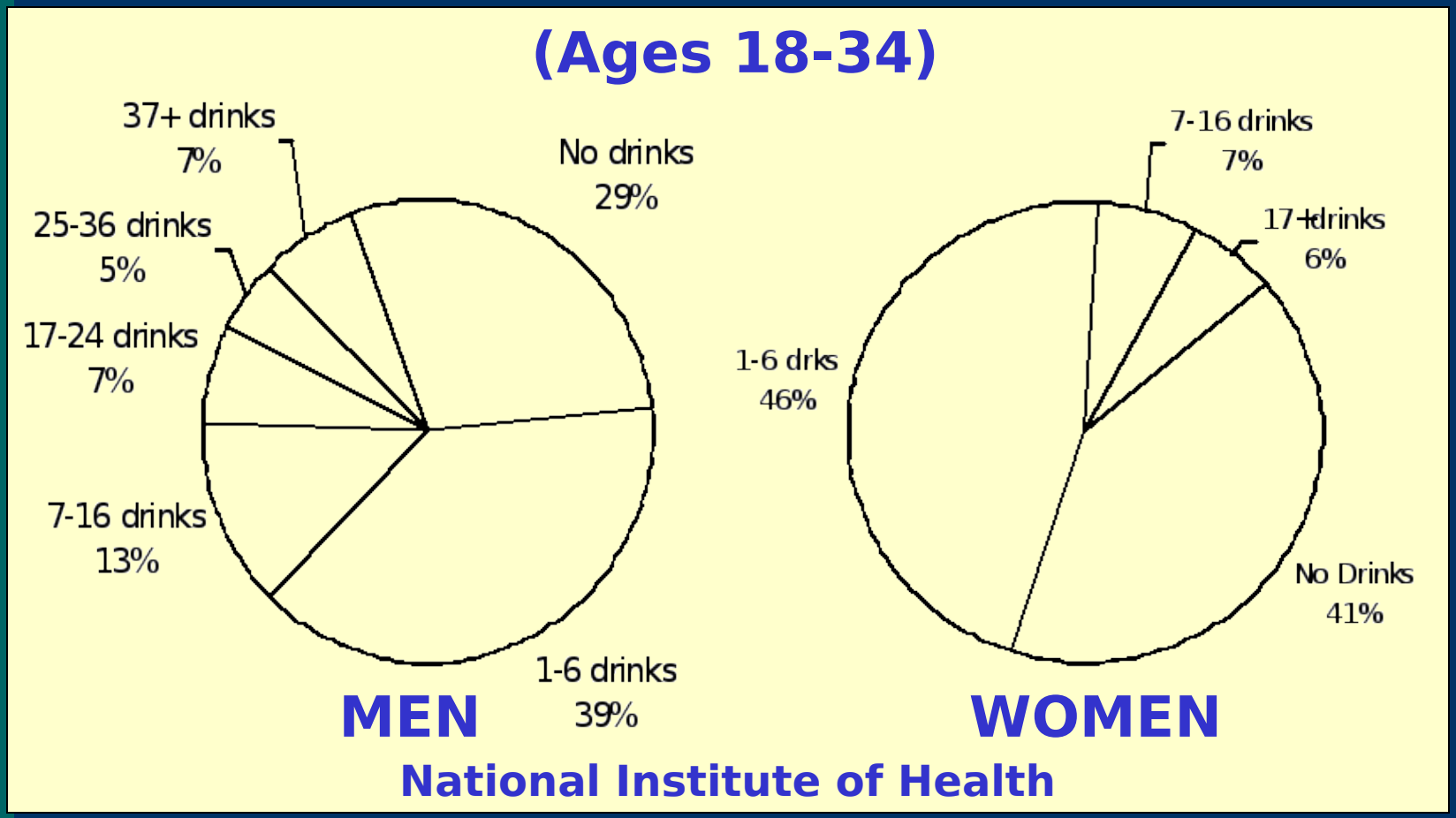
- Knowing someone who has killed him/herself
- Childhood abuse
- Current victim of domestic violence/abuse
- Difficulty getting along with others
- Difficulty adapting to military life (e.g., UAs)

Medical

Other risk factors:

- Social isolation/anomie:
  - feeling “separate” or “alone” from others
  - social awkwardness
- Sudden reversal in life status:
  - financial
  - loss of reputation or loss of honor
  - alcohol/substance abuse relapse

Weekly Alcohol Consumption



Security/BRIG

While in custody:

- Likelihood of a suicide jumps to 8 times that of the non-incarcerated population!
- Suicides are decreased by training and awareness of possibilities
- 50% of all jail suicides occur within 24 hours of lock-up

Security/BRIG

When to screen inmates:

- At entry classification/screening
- Randomly for those inmates at risk for suicide

Ongoing screening DECREASES detainee suicides by 150% !!!

Security/BRIG

High-risk factors among those detained include:

- Under the influence of alcohol/drugs
- Arrest for domestic violence, child abuse, DUI
- Detainment of those with little or no arrest record
- Difficulties adjusting to arrest
- Unusually optimistic thinking after arrest
- Unusual, paranoid, bizarre behavior or thinking

Security/BRIG

High-risk factors (continued)

- Those ostracized by other inmates
- Those in isolation/darkness
- Fear (real or imagined) of other inmates
- Denial of appeal, parole or expected release
- Bad news from home, lawyer, court, etc.
- Will be isolated and/or live alone after release

Security/BRIG

DO NOT attribute suicidal talk or behavior to:

- “Being drunk” or “feeling sorry for self”
- Seeking special treatment or accommodations
- Manipulation or “scamming”

Suicides CAN occur:

- During the briefest detainment in holding cell
- While awaiting bail/release

Security/BRIG

Review institutional policies on suicide:

- Risk assessment protocols
- Obtaining history of prior suicide risk
- Supervision of high-risk detainees
- Transfer protocol

Follow intuition about detainee suicide risk

The Beginning of Eternity
The End of Time and Space
The Beginning of Every End
The End of Every Place